/Form 990-EZ

Department of the Treasury

Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

➤ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

Open to Public Inspection

Α	For the	e 2012 calendar year, or tax year beginning , 20	12, and ending		, 20			
В	Check if ap	· · · · · · · · · · · · · · · · · · ·		D	Employer identification number			
	Addres	ss change INTERNATIONAL BROTHERHOOD OF ELECTRICAL W	INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS					
	Name	change LOCAL 569 CANDIDATES PAC		4	5-3711012			
3	_	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number				
	Termin	ASAS MIENTINOS AMENTES CHIEFE 100		858-569-8900				
		City or town, state or country, and ZIP + 4		\neg				
		san DIEGO, CA 92123-5615		ľ	Group Exemption Number ▶			
Ġ		nting Method X Cash Accrual Other (specify)	H Che		T 1			
	Websit				attach Schedule B			
	Tax-exem	pt status			, 990-EZ, or 990-PF)			
	Check only							
		re than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990	-N (e-postcard) may	y be re	equirea (see instructions). But it			
_	•	anization chooses to file a return, be sure to file a complete return						
		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to	•					
		column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ						
	art/l,	Revenue, Expenses, and Changes in Net Assets or Fund Bala	inces (see the	ınstru	uctions for Part I)			
		Check if the organization used Schedule O to respond to any question						
	1	Contributions, gifts, grants, and similar amounts received		1	79,184			
	2	Program service revenue including government fees and contracts		2				
	3	Membership dues and assessments		3	70,367			
	4	Investment income		4				
	5 a	Gross amount from sale of assets other than inventory 5a						
	b	Less cost or other basis and sales expenses						
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) .		5c				
	6	Gaming and fundraising events		MARKET C				
	a	· · · · · · · · · · · · · · · · · · ·		i,				
<u>o</u>	"	1 - 1		****				
'n		0.0,000/		Les Mass				
Revenue	B	Gross income from fundraising events (not including \$ of contribut	ions					
ĸ		from fundraising events reported on line 1) (attach Schedule G if the						
		sum of such gross income and contributions exceeds \$15,000) 6b		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
	С	Less direct expenses from gaming and fundraising events 6c Net income or (loss) from gaming and fundraising events (add lines 6a and		1,1				
	d		6b and subtract	**				
		line 6c)		6d				
	7 a	Gross sales of inventory, less tigetly is and allowances						
	b	Less cost of goddin sbid						
	C	Gross profit or (loss) frem sales of inventory (Subtract line 7b from line 7a)		7c				
	8	Other revenue (describe in Schedule 0)		8				
_,	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	149,551			
<u>z</u>	10	Grants and similar amounts paid (list in Schedule O)		10				
ว์	11			11				
AUG (0 g) Expenses	12	Benefits paid to or for members		12				
	1	Salaries, other compensation, and employee benefits		13	18,862			
	13	Professional fees and other payments to independent contractors			18,802			
X	14	Occupancy, rent, utilities, and maintenance		14				
	15	Printing, publications, postage, and shipping		15	125 026			
Assets	16	Other expenses (describe in Schedule O)		16	135,836			
	17	Total expenses. Add lines 10 through 16			154,698			
ţ	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-5,147			
Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (- , "% * x * *****				
		end-of-year figure reported on prior year's return)		19	18,695			
Net	20	Other changes in net assets or fund balances (explain in Schedule O)		20				
	21	Net assets or fund balances at end of year Combine lines 18 through 20	<u>.</u> . <u>.</u>	21	13,548			
_								

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2012)

Form 990-EZ (2012)				Page 2
Part II Balance Sheets (see the instructions for Par				
Check if the organization used Schedule O t			<u> </u>	
		(A) Beginning of year	 	nd of year
22 Cash, savings, and investments		18,695	22	13,548
23 Land and buildings			23	
24 Other assets (describe in Schedule O)			24	
25 Total assets		18,695	25	13,548
26 Total liabilities (describe in Schedule O)			26	
27 Net assets or fund balances (line 27 of column (B) must agr		18,695	27	13,548
Part III. Statement of Program Service Accomplis	hments (see the instruction		1	penses
Check if the organization used Schedule O to			(Required fo	
What is the organization's primary exempt purpose? To suppo			501(c)(3) ar	
Describe the organization's program service accomplishme	•••			s and section
as measured by expenses In a clear and concise manner				rusts, optional
persons benefited, and other relevant information for each		Widea, the number of	for others)	
00	· · · · · · · · · · · · · · · · · · ·			
28				
(Grants \$) If this amount in	cludes foreign grants, check he	ere	28a	
29				
				
(Grants \$) If this amount in	cludes foreign grants, check he	ere >	29a	
30				
	cludes foreign grants, check he		30a	
31 Other program services (describe in Schedule O)				
· · ·	cludes foreign grants, check he		31a	
32 Total program service expenses (add lines 28a through 3			32	
Part IV List of Officers, Directors, Trustees, and Key E				ctions for Part IV)
Check if the organization used Schedule O to re				
		7.	d) Health benefits,	
(a) Name and title	(b) Average hours per week	compensation con	tributions to employee	(e) Estimated amount of
• •	devoted to position	1	benefit plans, and ferred compensation	other compensation
Johnny Simpson		(ii not paid, enter -o-)		
Business Manager			^	
	2 Hrs	0	0	
Nicholas J. Segura, Jr.			•	
Assistant Business Manager	1 Hr	0	0	
David Taylor				
President	1 Hr	0	0	
	1			
				
		 		
				-
				1
		1		

Form 990-EZ (2012)

Form 9	90-EZ (2012)		F	age 3
Part	Other Information (Note the Schedule A and personal benefit contract statement requirements in	n the		
	instructions for Part V) Check if the organization used Schedule O to respond to any question in t	his Pa	rt V	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		х
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		
35 a		54		
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		_ <u>X</u> _
30	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		х
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a N/A		New York	
b	Did the organization file Form 1120-POL for this year?	37b	إ مطة ليا شيخ	التحدر شقط د
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	A		學
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	3	i urv	
39	Section 501(c)(7) organizations Enter	3 5 5 1	,	
a b	Initiation fees and capital contributions included on line 9			e de la comp
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶		.	
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	8	8786 F 1
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on		# Jr	r Carre
	organization managers or disqualified persons during the year under sections 4912,			-
d	4955, and 4958			
-	reimbursed by the organization	7.5 7.5		
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		Х
41	List the states with which a copy of this return is filed			
42 a	The organization's books are in care of ▶ Olson Hagel & Fishburn LLP Telephone no ▶ 916-442 Located at ▶ 555 Capitol Mall, Ste 1425 Sacramento, CA ZIP+4 ▶ 95814-4		2	
b	Located at ► 555 Capitol Mall, Ste 1425 Sacramento, CA ZIP + 4 ► 95814-4 At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
~	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		x
	If "Yes," enter the name of the foreign country		2),	· 4.
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	Move	AND THE	4.38
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		X
43	If "Yes," enter the name of the foreign country. ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		_	
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
			Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	Tana	.,	Jan de Jugo
_	completed instead of Form 990-EZ	44a	***	X 888.0756.866.1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be		di i	3 11
_	completed instead of Form 990-EZ Did the organization receive any payments for indoor tanning services during the year?	44b 44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? <i>If "No," provide an</i>	44C	e de la companya de	W
ч	explanation in Schedule O	44d	timilir	ion salidati
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		х
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		X

Form 990	D-ÈZ (2012)	age 4
	Yes Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	No
Part V	Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for line 50 and 51 Check if the organization used Schedule O to respond to any question in this Part VI	s
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax Yes	No
48 49 a b	year? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and	d key
	employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" (a) Name and title of each employee paid more than \$100,000 (b) Average hours per week devoted to position (c) Reportable compensation (d) Health benefits, contributions to employee benefit plans, and deferred compensation (Forms W-2/1099-MISC)	
51	Total number of other employees paid over \$100,000	than
52	Total number of other independent contractors each receiving over \$100,000 ▶ Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1)	
Under pe	nonexempt charitable trusts must attach a completed Schedule A	No t is
Sign Here	Signature of officer Date JOHNNY SIMPSON - BUSINESS MANAGER Type or print name and title	
Paid Prepar Use O	LE L NOTITED MADIANIADAGE COO TID / / LE LEUL NE GE GOGGGE	<u> </u>
May the	NORTH HOLLYWOOD, CA 91602-2828 818-769-2010 PRS discuss this return with the preparer shown above? See instructions	No (2012)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Complete if the organization is described below.
 ▶ Attach to Form
 ▶ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Name Corganization INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS Employer identification number 45-3711012		Section 501(c)(4), (5), or (6) org	nanizations Complete Part III	ax) 01 1 01111 990-L2, Fa	irt v, lille 33C (Froxy Tax), t	nen
Part I-B Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures. S			•	TRICAL WORKER	S Employer identi	ification number
Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures. 135,786 135,						012
Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures. 135,786 135,	Pa	rt I-A. Complete if the o	organization is exempt under s	section 501(c) or i	s a section 527 organ	nization.
Political expenditures					•	
Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. \$	2	· · · · · · · · · · · · · · · · · · ·	-			135,786
Part LB. Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955. 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If Yes, describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 5 Total exempt function activities 6 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 6 Did the filing organization file Form 1120-POL for this year? 7 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization filing organization in none, enter -0- 1) 2) 3) 4)	3					
Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. Enter the amount activities organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount paid from filing organization's funds if none, enter -0- In one, enter -0- 1)						
2 Enter the amount of any excise tax incurred by organization managers under section 4955 .	Pat	t I-B Complete if the o	rganization is exempt under s	ection 501(c)(3).		
2 Enter the amount of any excise tax incurred by organization managers under section 4955 .	1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$	
4a Was a correction made? b if "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. Did the filing organization file Form 1120-POL for this year? Did the filing organization in Ile Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from from filing organizations funds after one filing organizations funds if none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none, enter -0-infributions received and promptly and directly delivered to a separate political organization in none,	2	Enter the amount of any ex	cise tax incurred by organization m	anagers under sect	on 4955 ▶ \$	
b if "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organization's to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also ente the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds if none, enter-0- (e) Amount of political contributions received and promptly and directly delivered to a separate organization if none, enter-0- (1) 2) 3) 4)	3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		Yes No
Eart-IC Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0- 1) 2) 3) 4)	4a	Was a correction made?				L Yes No
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds if none, enter -0- provide information. If none, enter -0- provide information. If none, enter -0- provide information in part IV. 2) 4) 4) 4) 4) 4)				.: 504/ >		
activities						o)
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	1	· · · · · · · · · · · · · · · · · · ·			•	
Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	2					
Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, sucl as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds if none, enter -0- promptly and directly delivered to a separate political contributions received and promptly and directly delivered to a separate political organization if none, enter -0- 1) 2) 3) 4)	2			•	_	
Iline 17b	2				· · · · · · ·	
4 Did the filing organization file Form 1120-POL for this year?	3				_	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- filing organization in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0- 1) 2) 3) 4)	4					Vos No
organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- contributions received and promptly and directly delivered to a separate contributions received and promptly and directly delivered to a separate political organization. If none, enter -0- 1) 2) 3) 4)	-					
the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filling organization's funds. If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0- 1) 2) 3) 4)						
(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0- (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- 1)						
filing organization's funds if none, enter -0-		as a separate segregated fu	nd or a political action committee	(PAC) If additional:	space is needed, provide	e information in Part IV
filing organization's funds If none, enter -0-		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
delivered to a separate political organization if none, enter -0- 1) 2) 3) 4)		• •			filing organization's	
1)					funds if none, enter -0-	
1)						
2)						none, enter -u-
3)	(1)			-		
3)		· · · · · · · · · · · · · · · · · · ·			 	
4)	(2)		 	-		
4)				<u> </u>		
	(3)		<u> </u>	-		
5)	(4)			1		
~ <i>i</i>	 (5)	.				
	(5)			1		
6)	(6)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule C (Form 990 or 990-EZ) 2012

EIN	45-3711012
	Page 2
-	

Sch	INTERNATIONAL BROTHE: hedule C (Form 990 or 990-EZ) 2012	RHOOD OF EL	ECTRICAL WORKER	S LOCAL 569	CANDIDATES PAC	EIN 45-3711012 Page 2
	art II-A. Complete if the organize section 501(h)).	ation is exen	npt under section	501(c)(3) and	d filed Form 5768 (ele	ction under
A	Check ▶ If the filing organizat	on belongs to	an affiliated group	(and list in P	art IV each affiliated g	roup member's
	name, address, EIN, e					•
В	Check ▶ If the filing organizat	on checked b	oox A and "limited o	control" provis	sions apply.	
	Limits on Le	bbying Expen	ditures		(a) Filing	(b) Affiliated
	(The term "expenditures"	means amou	nts paid or incurred.)	organization's totals	group totals
1	a Total lobbying expenditures to influe	ence public opi	nion (grass roots lob	obying)		
	b Total lobbying expenditures to influe					
	c Total lobbying expenditures (add lir					
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures					
	f Lobbying nontaxable amount Enter					
	columns		J			
	If the amount on line 1e, column (a) or (b)	ıs: The lobbyın	g nontaxable amount is	s:	1	·
	Not over \$500,000	20% of the a	amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 pl	us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 pl	us 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,00	0 \$225,000 pl	us 5% of the excess or	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
	g Grassroots nontaxable amount (en	er 25% of line	1f)			
	h Subtract line 1g from line 1a if zero	or less, enter -				
	i Subtract line 1f from line 1c If zero	or less, enter -				
	j If there is an amount other than	zero on either				<u> </u>
	reporting section 4911 tax for this	ear?				Yes No
	columns t	hat made a se elow. See the	instructions for lin	n do not have es 2a through	, to complete all of the fi 2f on page 4.)	ve
	L	obbying Exper	nditures During 4-Ye	ar Averaging P	eriod	
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount					~~

	Lobbying Exper	nditures During 4-Ye	ear Averaging Period	<u></u>	
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule Č (Form 990 or 990-EZ) 2012

Page 3

For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(:	a)		(k)	
	ription of the lobbying activity	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	:			,		
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1)?						
С	Media advertisements?				- 37.6n	X	•
d	Mailings to members, legislators, or the public?						
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?			-			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>				
i	Other activities?						
j	Total Add lines 1c through 1i	<u> </u>	Čâ				
2 a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?			ecutifiée			
b	If "Yes," enter the amount of any tax incurred under section 4912	, Zžari	L.E.				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		I.WY	22000	2.75	. 2998	***
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			%%7,	<u></u>	18,	. 47
150	501(c)(6).	(C)(5)	, or s	ectio	on		
1	Were substantially all (90% or more) dues received nondeductible by members?					Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				2		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	·		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).		of				
а	Current year			2a			
b	Carryover from last year			2b			-
C	Total			2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion			3			
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible k			1			
	and political expenditure next year?	•	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
₽aı	Supplemental Information						
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information			,			
Par	t I-A - Line 1:						
<u></u>	o support or oppose candidates for office						

SCHEDÙLE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047 Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

NTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 569 CANDIDATES PAC	45-3711012
Part I - Line 16: Other Expenses	
Political Contributions	
Filing Fee	. 50
Total	. \$ 135,836
	·

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Internal Revenue	Service File	a separate a	oplication for each return.		
	filing for an Automatic 3-Month Extension,				X
	filing for an Additional (Not Automatic) 3-N				
Do not comp	<i>lete Part II unless</i> you have already been gr	anted an au	tomatic 3-month exten	ision on a previously filed Form 886	3
a corporation 8868 to req Return for 1	ling (e-file). You can electronically file Form required to file Form 990-T), or an addition uest an extension of time to file any of the ransfers Associated With Certain Person For more details on the electronic filing of	onal (not au e forms liste ial Benefit (tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus	nsion of time. You can electronical with the exception of Form 8870, at be sent to the IRS in paper f	ly file Form Information ormat (see
	omatic 3-Month Extension of Time. O				
A corporation	n required to file Form 990-T and requestin	g an automa	atic 6-month extension	- check this box and complete	
All other cor	porations (including 1120-C filers), partners	hips, REMIC	Cs, and trusts must use	Form 7004 to request an extension of	of time
to file income				Enter filer's identifying number, se	
Type or	Name of exempt organization or other filer, see INTERNATIONAL BROTHERHOOD OF		CAL WORKERS	Employer identification number (EIN)	or
print	LOCAL 569 CANDIATE PAC			X 45-3711012	
File by the	Number, street, and room or suite no If a P O b	ox, see instru	ctions	Social security number (SSN)	
due date for filing your	4545 VIEWRIDGE AVENUE, SUITE	100			
return See	City, town or post office, state, and ZIP code Fo		dress, see instructions	<u> </u>	
instructions	SAN DIEGO, CA 92123-5615				
Enter the Re	turn code for the return that this application	n is for (file a	a separate application f	or each return)	. 0 1
Application		Return	Application		Return
ls For		Code	Is For		Code
Form 990 or	Form 990-EZ	01	Form 990-T (corpora	ation)	07
Form 990-BL		02	Form 1041-A		08
Form 4720-	(individual)	03	Form 4720		09
Form 990-PF	•	04	Form 5227		10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephone If the orga If this is for the whole a list with the I reque until At for the X If the ta	e names and EINs of all members the extension automatic 3-month (6 months for a co	f business ir our digit Gro If it is for pasion is for orporation re exempt org	FAX No 818-48 The United States, checked by Exemption Number art of the group, checked equired to file Form 99 ganization return for the product of the group in the group	eck this box (GEN) If the this box and attention of time the organization named above The end of the end o	
	application is for Form 990-BL, 990-PF, 9	990-T, 4720	, or 6069, enter the	-	N/A
	indable credits See instructions application is for Form 990-PF, 990-T	4720 01	6069 enter any r	afundable credits and	M/M
	ed tax payments made Include any prior ye				N/A
	e due. Subtract line 3b from line 3a Include				
	onic Federal Tax Payment System) See instr			3c \$	N/A
Caution. If you	are going to make an electronic fund withdraw	al with this F	orm 8868, see Form 8453	3-EO and Form 8879-EO for payment in	structions